

# STATE OF MAINE DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION OFFICE OF LICENSING AND REGISTRATION INDIVIDUAL LICENSE APPLICATION

	I ID OT LE LIGHT	_ / \			
А	PPLICANT INFORM	ATION (please	print)		
FULL LEGAL NAME FIRST	MIDDLE IN	IITIAL	L	AST	
ANY OTHER NAMES EVER USED:					
DATE OF BIRTH mm / dd / yyy	У	SOCIAL SECURI	ITY NUMB	BER -	-
MAILING ADDRESS					
CITY	STATE	ZIP	COUN	TY	
PHONE # ( )	FAX # ( )	E-MAIL	L		
CRIMINAL BACKGROUND DISCLOSURE  NOTE: Failure to disclose criminal convictions may result in denial, fines, suspension and/or revocation of a license.  1. Have you ever been convicted by any court of any crime? (circle one) NO YES  If yes, enclose a detailed description of what happened (including dates) and a copy of the court judgment.  2. Has any jurisdiction taken disciplinary action against any professional license you hold or have held, or denied your application for licensure? (circle one) NO YES  If yes, enclose a detailed explanation and copies of all documents.  By my signature, I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief.					
By submitting this application, I affirm that the and that this information is truthful and facturevocation of my license if this information is	ne Office of Licensing and Rual. I also understand that s	egistration will rely u	ipon this info	ormation for issuance	e of my license
SIGNATURE	D/	ATE			
BOARD OF ARCHITEC	CTS, LANDSCAPE A				IERS

LICENSE TYPE:   ARCHITECT  LANDSCAPE ARCHITECT  INTERIOR DESIGNER						
CHECK ONE	TYPE OF APPLICATION	FEE	CRIMINAL HISTORY	TOTAL FEES		
	EXAM (ARE)(LARE)	\$100	\$21	\$121		
	RECIPROCITY	\$100	\$21	\$121		
	NCARB* \$100		\$21	\$121		
	CLARB** \$100		\$21	\$121		
	NCIDQ*** \$100		\$21	\$121		
	REINSTATEMENT OF LAPSED LICENSE (UP TO 2 YEARS)	SEE INSTRUCTIONS FOR FEE SCHEDULE				

Office Use Only: 1446—\$100 2619—\$21.00

Office Use Only
Check #
Amount:
Cash #
Lic. #
Issue Date
Exp. Date

PAYMENT OPTIONS:  Make checks payable to "Maine State Treasurer" - If you wish to pay by Mastercard or Visa, fill out the following:						
NAME OF C	ARDHOLDER (plea	se print)	FIRST	MIDDLE INITIAL	LAST	
I authorize th	I authorize the Department of Professional and Financial Regulation, Office of Licensing and Registration to charge my					
$\square$ VISA	☐ MASTER	RCARD	the following amount	: \$		
	Card number:	XXXX-XX	XX-XXXX-XXXX	Expiration Date	mm / yyyy	
SIGNATU	RE			DATE		

NAME:
EDUCATION
If <u>NOT</u> applying with an NCARB certificate or with an IDP record, please have an official copy of your college transcript(s) forwarded to this office
<u>OTHER</u>
If applying by reciprocity, list which state are you applying from AND enclose an original verification of current licensure from that state.
In which state did you take the national exam (ARE, LARE, NCIDQ) or equivalent? Please provide an original verification of exam from that state.
APPLICANT'S CERTIFICATION AND SIGNATURE
Read the statement below and sign where indicated as your certification of the information provided on this application.
By my signature, I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief.
I will not perform or contract for any architectural services in the state of Maine until such time as this application is approved and a license has been granted to me by the Maine Board.
By submitting this application I understand that the Maine Board of Architects, Landscape Architects and Interior Designers will rely upon this information for issuance of my license and that this information is truthful and factual.
I further understand that sanctions may be imposed, including denial, suspension or revocation of my license if this information is found to be false.
Applicant's SignatureDate:

NAME:	

## **PRACTICAL EXPERIENCE**

THIS SECTION TO BE USED TO VERIFY QUALIFICATION FOR LICENSURE WHEN THE APPLICANT DOES NOT HAVE AN NCARB/CLARB/NCIDQ CERTIFICATION OR AN IDP RECORD. IN ADDITION TO COMPLETING THIS CHART, THE APPLICANT MUST ALSO PROVIDE A SIGNED EMPLOYMENT VERIFICATION FORM FOR EACH EMPLOYER LISTED.

\*If part-time work is noted, state average number of hours per week. \*\*If "other" kinds of work are noted, please describe.

Each employer noted must also sign an employment verification form.

Full Name & Complete Address of Supervisors of work experience	Dates of Employment Give Month & Year	Total Emplo Emplo Part* Time		General Practice	Teaching & Research	Public Service	Other—Explain*
	From						
	То						
	From						
	То						
	From						
	То						
	From						
	То						
	From						
	То						
	From						
	То						
	From						
	То		-				

# MAINE STATE BOARD FOR LICENSURE OF ARCHITECTS LANDSCAPE ARCHITECTS AND INTERIOR DESIGNERS

# **VERIFICATION OF EMPLOYMENT FORM**

NAME OF APPLICANT			
ADDRESS			
IS/WAS EMPLOYED BY			
DATES FOR EMPLOYMENT:			
FROM	1TO	FULL TIME	PART TIME
POSITION			
AREA OF EXPERIENCE:			
SPECIFICATION	RAWINGSONS	TEACHI	SSIONAL ADMIN NG-ENGINEERING NG OR RESEARCH
SIGNATURE		DATE	
PLEASE INDICATE YOUR OF CHITECTURE BY PLACING A PRACTICAL EXPERIENCE: COMMENTS:	N "X" IN THE APPRO	OPRIATE SPACE BELOW: SATISFACTORY	RACTICE ARCHITECTURE/LANDSCAPE ARUNSATISFACTORY
PROFESSIONAL COMPETEN	EXCELLENT		UNSATISFACTORY
FIRM NAME		POSI	ΓΙΟΝ IN FIRM
SIGNATURE			DATE
NAME PRINTED			

PLEASE MAIL THE COMPLETED FORM TO: MAINE BOARD FOR LICENSURE OF ARCHITECTS LANDSCAPE ARCHITECTS & INTERIOR DESIGNERS, 35 STATE HOUSE STATION, AUGUSTA, ME 04333

# **ARCHITECT LICENSING**

Architects can become licensed by one of the following options:

- 1. Architect Registration Examination (ARE)
- 2. Reciprocity with License in Another State
- 3. Reciprocity with Current NCARB Record
- 4. Reinstatement of a Lapsed License

# APPLICATION TO TAKE THE ARCHITECT REGISTRATION EXAM (ARE)

An application file shall consist of:

State of Maine Application Form

- A check payable to "Treasurer State of Maine" in the amount of \$121.00 (non-refundable)
- Council record from National Council of Architectural Registration boards (NCARB)
- indicating that the applicant has met the current requirements of the Intern Development Program (IDP) or equivalent as described under board rules section 2, paragraph A.
- Employment Verification Form

Once the application is complete and Board receives letters back from references, the Board Coordinator schedules the applicant for a personal interview.

**PERSONAL INTERVIEW:** A 15 minute personal interview is required of all ARE applicants to determine if minimum qualifications have been obtained to qualify for examination. At this time the applicant brings a portfolio that includes samples which best portray the depth and scope of their work. To prepare for the interview, applicants should be familiar with current life/safety building codes.

The Board will approve/deny applications to sit for the ARE. If approved the Board Coordinator will forward testing information to the testing company and notify applicant of approval. All other testing information will come from the testing company. If the application is denied the Board Coordinator will notify the applicant of deficiencies determined by the Board.

Exams are currently offered through Thomson/Prometric on a daily basis. Once applicant receives testing information from the testing company, exams may be scheduled with on a first come, first served basis.

Current rules state that the applicant must successfully complete the ARE within any five (5) year examination period or be subject to reapplication.

## After Board Approval:

- Applicant Scheduled for Examination with Testing Center
- Applicant Begins Testing for all Sections of Examination
- Board Coordinator Tracks Scores & Maintains Chart of Completed Sections
- When All Sections are Completed Board Formally Accepts Score Report
- Offer License to Applicants Who Successfully Complete ARE
- Issue license number through Licensing System to Candidate
- Candidate Required to Provide Seal with Assigned Number and \$60.00 License Fee
- Board Coordinator Receives License Fee with Evidence of Seal
- Board Coordinator Officially Activates License through Licensing System
- Renew License on June 30th Annually (\$60.00 renewal fee)

# APPLICATION FOR ARCHITECT LICENSE VIA RECIPROCITY WITH ANOTHER STATE

Applicant is a current licensee of another state. An application file shall consist of:

- State of Maine Application Form
- A check payable to "Treasurer State of Maine" in the amount of \$121.00 (non-refundable)
- Original College Transcripts
- Employment Verification Form (Should verify a minimum of 3 years of diverse experience under a licensed architect)
- Include an original evidence of Licensure (Preferably from your original license state and includes exam scores. This should also indicate that the license is current.)

Once the application is complete and Board receives letters back from references, the Board Coordinator schedules the applicant for a personal interview.

If Approval Granted/Denied by the Board:

#### If Denied:

Applicant will be Notified in Writing of deficiencies and has 30 days to Appeal

## If Approved:

- License Number is issued through Licensing system
- Applicant Sent Approval Letter with \$60.00 License Fee and Seal Requirements
- Board Coordinator Receives License Fee with Evidence of Seal
- Board Coordinator Officially Activates License
- Renew License on June 30th Annually (\$60.00 renewal fee) (Renewal notices usually go out in the end of April)

\*PERSONAL INTERVIEW: A 15 minute personal interview is required of all reciprocity applicants to determine if minimum qualifications have been met. At this time the applicant brings a portfolio that includes samples which best portray the depth and scope of their work. To prepare for the interview, applicants should be familiar with current life/safety building codes.

# APPLICATION FOR ARCHITECT LICENSE VIA RECIPROCITY WITH NCARB RECORD

Applicant is a current licensee of another state. The applicant files application through the National Council of Architectural Registration Boards (NCARB). By utilizing NCARB the applicant is **not** required to appear before the Board for a personal interview.

#### STEPS TO APPLY VIA NCARB:

Call or email NCARB to request a transmittal of your records to Maine (make sure your file is current with them)

- Download and complete the State of Maine Application
- Enclose a \$121 Non-Refundable Application Fee (Make check payable to "Treasurer State of Maine") and mail to:

MAINE BD OF ARC, LARC & CIDs 35 STATE HOUSE STATION AUGUSTA, ME 04333

Upon receipt of all of the items listed above, the Maine Board will:

- Issue a License Number through Licensing System
- Send the Applicant an Approval Letter which:
  - Specifies the Seal Requirements and
  - ♦ Request annual \$60.00 License Fee
- When the Board Receives License Fee with Evidence of Seal:
  - ♦ License Number is activated
  - ♦ License is printed and mailed (it can take up to 2 weeks to receive a license)
- Licenses are renewed on June 30th Annually -\$60.00 renewal fee
  - ♦ (Renewal notices usually go out in the beginning of April)

## APPLICATION FOR REINSTATEMENT OF AN ARCHITECT LICENSE WHICH HAS LAPSED MORE THAN 90 DAYS BEYOND THE EXPIRATION DATE

Licensees whose licenses have lapsed beyond 90 days after the expiration date must re-apply as a new applicant via NCARB <u>OR</u> via direct reciprocity with another state. All steps will be the same as noted previously for new applicants except for the fee schedule which is as follows:

Reinstatement fee: \$100.00 This is a one time fee.

Back Renewal fees: \$60.00 For each year beyond the expiration date.

Back Late fees: \$50.00 For each year beyond the expiration date.

STATE OF MAINE DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION - OFFICE OF LICENSING & REGISTRATION

Mailing Address: 35 State House Station, Augusta, Maine 04333 Courier/Delivery address: 122 Northern Avenue, Gardiner, Maine 04345

Phone: (207) 624-8603 Fax: (207) 624-8637 Hearing Impaired: (888) 577-6690 web: www.maine.gov/professionallicensing

### **Frequently Asked Questions:**

- Where do I send my application? Our mailing address is 35 State House Station, Augusta, Maine 04333-0035
- Where are you located? 122 Northern Avenue, Gardiner, Maine. What hours are you open? 8:00 AM to 5:00 PM weekdays.
- Can I come to Gardiner to drop off my application? Yes. You will not leave with a license, though.
- Can I come to Gardiner to pick up my license? No. Your license will be mailed to you.
- How long does it take to process an application? You can check our website:
   www.maine.gov/professionallicensing. Your license will show up as PENDING at first; as soon as your status is ACTIVE, you are authorized to practice.
- How far back do I go answering the criminal question? Any conviction, ever.
- Is an NCARB certification required for a reciprocal license? No, but it is the fastest way to become licensed since it does not require board approval or an interview. NCARB applications can be completed within a couple of weeks assuming the application is complete.
- Can an architect without an NCARB/CLARB certificate obtain a reciprocal license? Yes. The applicant must provide extensive verification of all education and experience which will be evaluated by the board. An interview is also required which will not be scheduled until the application has been received and evaluated.
- How long does it take to approve a reciprocal license? It could take several months depending
  on the documentation submitted and the interview schedule.
- Does Maine license companies? No.
- Does Maine have a continuing education requirement for renewal? No.
- Is there a charge to send my registration history and/or exam scores to another state for a reciprocal license or to NCARB for certification? Yes, the fee is \$10.

#### **NOTICES**

BACKGROUND CHECK: Pursuant to 5 M.R.S.A. §5301 - 5303, the State of Maine is granted the authority to take into consideration an applicant's criminal history record. The Office of Licensing and Registration requires a criminal history records check as part of the application process for all applicants.

PUBLIC RECORD: This application is a public record for purposes of the Maine Freedom of Access Law (1 MRSA §401 et seq). Public records must be made available to any person upon request. This application for licensure is a public record and information supplied as part of the application (other than social security number and credit card information) is public information. Other licensing records to which this information may later be transferred will also be considered public records. Names, license numbers and mailing addresses listed on or submitted as part of this application will be available to the public and may be posted on our website.

SOCIAL SECURITY NUMBER: The following statement is made pursuant to the Privacy Act of 1974 (§7(B)). Disclosure of your Social Security Number Is mandatory. Solicitation of your Social Security Number is solely for tax administration purposes, pursuant to 35 MRSA §175 as authorized by the Tax Reform Act of 1975 (42 USC §405(C)(2)(C)(1)). Your Social Security Number will be disclosed to the State Tax Assessor or an authorized agent for use in determining filing obligations and tax liability pursuant to Title 36 of the Maine Revised Statutes. No further use will be made of your Social Security Number and it shall be treated as confidential tax information pursuant to 36 MRSA §191.

#### Before you seal the envelope, did you:

- Complete every item on the application (incomplete applications may be returned)
- Answer the criminal background disclosure questions
- Sign and date your application
- Include correct amount (payable to Maine State Treasurer) or credit card information (plus signature)
- Include any required transcripts or exam results
- Make a copy of your application to keep for your records
- DO NOT SEND CASH.